6TL0DJJ8WF 23-01840

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

| _ | | | | | | | | | | |
|------------|---|---------------------------------------|-----------------------|---------------------------------|---|----------------------------------|--|-------------------------------------|----------------------|--|
| | Document Number Override Primary Crash Document# | | | Agency Crash Number 23-01840 | | I | Investigating Officer/Deputy DEPUTY J. TROTH | | | |
| NΕ | Crash Date Crash Time 02/21/2023 07:30 PM | | Date | Date Arrived | | Time | Time Arrived | | | |
| 18 | Date Notified Time Notified 02/21/2023 07:35 PM | | Tota | Il Units | | Total 00 | | Injured Total Killed | | |
| 6TL0DJJ8WF | On Emergency Hit | On Emergency Hit and Run Lane Closure | | □ Wo | ork Zone | | Trailer or T | owed | Reporting Threshold | |
| Ĭ | Government Active School Zone | | | School Bus Related | | Tags | | | | |
| W | Reportable | Crash Type NON-DOMESTICATED | ANIMAL W | / NO INJU | RY | <i></i> | ∖mended | | Secondary Crash | |
| | I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. | | | | | | | | | |
| i | Location | | | | | | | | | |
| ï | | | | | I | | | T | 1 | |
| 1 | ON STH23 EB | | | | 1 | Latitude Longitude | | | | |
| | 633 FT S | | | | | 43.565810557 X Coordinate | | -89.837 | 7695952 | |
| | OF HERWIG RD | | | | | | | Y Coord | inate | |
| | IN THE TOWN OF DELLONA | | | | 270832.875 | | 482756 | | | |
| | IN SAUK COUNTY | | | | | | | 402100 | ··· | |
| | | | | | Structure | Туре | | | | |
| | Crash Scene | | | | | | | | | |
| , | | | | | _ | | | | | |
| | First Harmful Event | | | | FirstHarm | nful Event Lo | cation | | | |
| | NON DOMESTICATED ANIMA | AL (ALIVE) | | | ON ROA | DWAY | | | | |
| ŀ | Manner of Collision | | | | 1 ight Con | Light Condition | | | | |
| | 00 - NO COLLISION W/VEHIC | LE IN TRANSPORT | | | Ligittoon | anson | | | | |
| ŀ | Road Surface Condition(s) | | | | Poadway | Factor(s) | | | | |
| | Toda Garrace Gorialion(s) | | | | stoadway | Roadway Factor(s) | | | | |
| | | | | | | | | | | |
| | Environment Factor(s) | | | | | | | | | |
| | | | | | | | | | | |
| | Weather Condition(s) | | | | | | | | | |
| | | | | | | | | | | |
| l | AnimalType | | | | Relation To Trafficway | | | | | |
| | DEER | | | | TRAFFICWAY - ON ROAD | | | | | |
| | Crash Classification - Location PUBLIC PROPERTY Tribal Land | | | | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | | | | | |
| | | | | Acc | | Access Control | | | Special Study | |
| ļ | linit Cummer: | | | | <u> </u> | | | | | |
| | Unit Summary - | | | | | | | | | |
| | Unit Status Vehicle Operating A | | | | Classification | ļ. | UnitType | | | |
| | IN TRANSIT D C | | | D CLASS | | | TRUCK | | | |
| | Vehicle Type | | | | | Operating As Endorsements | | | | |
| 01 | UTILITY TRUCK/PICKUP TRUCK | | | | | | -,3 | | | |
| - | <u> </u> | | | | d Total Trail | | ilers | | MatTypos | |
| | 1 | riall#Bus#itecolued | Total#Citations Issue | | u | 0 | ai i railers | | wat Types | |
| - | | Direction Of Travel | | | | Speed Limit | | TotalLanes | | |
| F | | EASTBOUND | F16 | Pre CrashTire Spe Mark | | | | | | |
| L N | Most Harmful Event: Collision With | | | Special Function | | <u> </u> | | Emergency Motor Vehicle Use | | |
| ب | NON DOMESTICATED ANIMAL (ALIVE) | | | NO SPECIAL FUNCTI | | TION | | NOT APPLICABLE | | |
| | Traffic Way | | | Traffic Control | | | | Traffic Control Inoperative/Missing | | |
| | | | | | | | | | | |
| | Surface Type | | | Road Curvature | | | Road Grade | | | |
| | | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000 Crash Date 02/21/2023
Crash Time 07:30 PM

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Crash Date 02/21/2023

Crash Time 07:30 PM

| | Truc | ck Bus or HazMat | | | | | | | | |
|----------|----------|--|---------------------------------------|--|----------------|---|-----------|--|--|--|
| | | Wahiola | | | | | | | | |
| | | Vehicle License Plate Number | | Plate Type St | | Country of Issuance | | | | |
| | | 15DFD | | LTK - LIGHT TRUCK | WI | UNITED STATES | | | | |
| 5 | 5 | Vehicle Identification Number 5TFDW5F11EX360969 | | Make TOYOTA | Year 2014 | Model TUNDRA | | | | |
| | | Color | | Body Style | | Bus Use | | | | |
| | | BLU - BLUE Initial Contact Point | | PK - PICKUP Vehicle Damage | | | | | | |
| ⊨ | VEHICLE | 01 - RIGHT FRONT CORNER | | - | ODNED 02 DI | 7 8 9 10 11 | | | | |
| INO | Ŧ | Extent Of Damage FUNCTIONAL DAMAGE Towed Due To Damage | | 01 - RIGHT FRONT CO FRONT, 12 - FRONT | URNER, UZ - RI | GHI SIDE | 5 4 3 2 1 | | | |
| | 3 | | | Vehicle Removed By | | CONTRACTOR OF ANTARA TO CONTRACTOR OF THE | | | | |
| | | NOT TOWED | | , | | | | | | |
| | | What Driver Was Doing | | Vehicle Factors | | | | | | |
| | | Driver Prior Action Other | | | | | | | | |
| | | Driver Actions | Delica Antiqua | | | | | | | |
| | щ | 88 | Driver Actions NO CONTRIBUTING ACTION | | | | | | | |
| UNIT | ₫ | | | | | | | | | |
| ⋾ | VEHICLE | | | | | | | | | |
| | | | | | | | | | | |
| | | OwnerName | | Owner Address | | | | | | |
| 2 | 5 | | | | | | | | | |
| | | L | | | | | | | | |
| IN | | Policy Holder Insurance Company Individual | | | | | | | | |
| ⋾ | | EATON-INS-CO | | JACOB HESSE | | | | | | |
| | | Individual | | | | | | | | |
| | | Driver JACOB K HESSE Address | | Citations Issued 0 | Sex MALE | | | | | |
| | DIMIDUAL | | | Date of Birth | Race WHITE | | | | | |
| TNO N | 9 | | | Driver License Number | | | | | | |
| ∍ | | E9805 BUCKHORN RD REEDSBURG, WI 53959, US | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | |
| | | | | | | | | | | |
| | | On Duty Crash | | Safety Equipment | | | | | | |
| | Sa | fety Equipment | | | | | | | | |
| | | Row | Seat Position | SHOULDER & LAP | BELI | | | | | |
| | | HelmetUse | | Helmet Compliance | | | | | | |
| | | Eye Protection | | TintCompliance | | | | | | |
| | | | | | | | | | | |
| 5 | 8 | Injury Severity NO APPARENT INJURY | | Airbag | | | | | | |
| | | Ejection Path | | | | Trapped/Extricated | | | | |
| | | Medical Transport | | EMS Agency Identifier | | EMS Run# | | | | |
| | | NOT TRANSPORTED | | | | | | | | |
| | | Hospital | | Date of Death | | Time of Death | | | | |

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Crash Date 02/21/2023

Crash Time 07:30 PM

| | | Distracted By Source | æ | | | | | |
|----------|------------|--|-------------------|-------------------|---|----------------------|----------------|--|
| | | Distracted By Action | | | | | | |
| | | | | | | | | |
| | | Non Motorist Striking Unit# | Location | | | | | |
| | | Prior Action Prior Action | | | | | | |
| | | | | | | | | |
| | | Action | | | | | | |
| | | | | | | | | |
| | 7 | | | | | | | |
| <u>.</u> | 9 | | | | | | | |
| UNIT | INDIWIDUAL | | | | | | | |
| | Ź. | | | | | | | |
| | Z | | | | | | | |
| | _ | | | | | | | |
| | | | | | | | | |
| | | Action Other | | | | | To/From School | |
| | | | | | | | | |
| | | Drug & Alcohol NO Suspected Alcohol Use NO Suspected Drug Use NO | | | | | | |
| | į | Drug & Alcohol No | NO | | | | | |
| | | Alcohol Test Given | Alcohol Test Type | | | Alcohol Test Results | | |
| | | TEST NOT GIVEN | | | | | | |
| | | Drug Test Given Drug Test T | | Drug Test Results | | 5 | | |
| | | TEŠT NOT GIVEN | | | - | | | |
| _ | ~ | Drug Type | 1 | | | | | |
| 01 | 8 | 3 7. | | | | | | |
| | | | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORMAL | | | | | | |
| | | AFFEARED NORWAL | | | | | | |
| | | | | | | | | |